

MELLEN MANOR

450 LAKE DRIVE

MELLEN

54546

Phone: (715) 274-5706

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/01): 40

Total Licensed Bed Capacity (12/31/01): 40

Number of Residents on 12/31/01: 40

Ownership:

Highest Level License:

Operate in Conjunction with CBRF? No

Title 18 (Medicare) Certified? No

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 36

Limited Liability Partnership

Skilled

No

No

Yes

36

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		45.0
Supp. Home Care-Personal Care	No					1 - 4 Years		35.0
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	5.0	More Than 4 Years		20.0
Day Services	No	Mental Illness (Org./Psy)	52.5	65 - 74	7.5			-----
Respite Care	Yes	Mental Illness (Other)	10.0	75 - 84	37.5			100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	40.0	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	2.5	95 & Over	10.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	17.5	65 & Over	95.0	-----		
Transportation	No	Cerebrovascular	7.5		-----	RNs		7.7
Referral Service	No	Diabetes	2.5	Sex	%	LPNs		5.9
Other Services	No	Respiratory	2.5		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	5.0	Male	42.5	Aides, & Orderlies		
Mentally Ill	No		-----	Female	57.5			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care			Managed Care				
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	Total Resi - dents	% Of All
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	37	100.0	105	0	0.0	0	3	100.0	121	0	0.0	0	0	0.0	0	40	100.0
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		37	100.0		0	0.0		3	100.0		0	0.0		0	0.0		40	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	22.2	Daily Living (ADL)	Independent			
Private Home/With Home Health	7.4	Bathing	5.0	60.0	35.0	40
Other Nursing Homes	37.0	Dressing	12.5	70.0	17.5	40
Acute Care Hospitals	25.9	Transferring	57.5	25.0	17.5	40
Psych. Hosp. -MR/DD Facilities	7.4	Toilet Use	42.5	37.5	20.0	40
Rehabilitation Hospitals	0.0	Eating	62.5	20.0	17.5	40
Other Locations	0.0	*****				
Total Number of Admissions	27	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	5.0	Receiving Respiratory Care		2.5
Private Home/No Home Health	4.2	Occ/Freq. Incontinent of Bladder	45.0	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	42.5	Receiving Suctioning		0.0
Other Nursing Homes	12.5			Receiving Ostomy Care		0.0
Acute Care Hospitals	8.3	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets		20.0
Rehabilitation Hospitals	0.0					
Other Locations	4.2	Skin Care		Other Resident Characteristics		
Deaths	70.8	With Pressure Sores	0.0	Have Advance Directives		60.0
Total Number of Discharges		With Rashes	2.5	Medications		
(Including Deaths)	24			Receiving Psychoactive Drugs		62.5

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Peer Group %	Ratio	Bed Size: Under 50 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	90.0	80.3	1.12	88.0	1.02	84.4	1.07	84.6	1.06
Current Residents from In-County	55.0	72.7	0.76	74.3	0.74	75.4	0.73	77.0	0.71
Admissions from In-County, Still Residing	37.0	18.3	2.02	36.2	1.02	22.1	1.68	20.8	1.78
Admissions/Average Daily Census	75.0	139.0	0.54	110.6	0.68	118.1	0.64	128.9	0.58
Discharges/Average Daily Census	66.7	139.3	0.48	90.2	0.74	118.3	0.56	130.0	0.51
Discharges To Private Residence/Average Daily Census	2.8	58.4	0.05	23.0	0.12	46.1	0.06	52.8	0.05
Residents Receiving Skilled Care	100	91.2	1.10	81.8	1.22	91.6	1.09	85.3	1.17
Residents Aged 65 and Older	95.0	96.0	0.99	96.8	0.98	94.2	1.01	87.5	1.09
Title 19 (Medicaid) Funded Residents	92.5	72.1	1.28	79.1	1.17	69.7	1.33	68.7	1.35
Private Pay Funded Residents	7.5	18.5	0.40	18.6	0.40	21.2	0.35	22.0	0.34
Developmentally Disabled Residents	0.0	1.0	0.00	0.4	0.00	0.8	0.00	7.6	0.00
Mentally Ill Residents	62.5	36.3	1.72	60.5	1.03	39.5	1.58	33.8	1.85
General Medical Service Residents	5.0	16.8	0.30	11.1	0.45	16.2	0.31	19.4	0.26
Impaired ADL (Mean)	43.0	46.6	0.92	46.3	0.93	48.5	0.89	49.3	0.87
Psychological Problems	62.5	47.8	1.31	62.1	1.01	50.0	1.25	51.9	1.20
Nursing Care Required (Mean)	3.1	7.1	0.44	4.3	0.72	7.0	0.44	7.3	0.43